OFFICE OF THE STATE BUDGET OFFICE OF FINANCIAL MANAGEMENT

REQUEST FOR FINANCIAL MANAGEMENT & REPORTING SYSTEM DEVELOPMENT OR ENHANCEMENTS

Effective immediately, any financial management system development or enhancement project involving disbursements, receipts, payroll-related activities, interfaces to or from MAIN FACS or procurement activities resulting in accounting transactions are subject to Office of Financial Management (OFM) review and approval. OFM will prioritize financial management system development and enhancements.

At each CFO Council meeting, the submitted requests will be discussed and input will be sought. First priority will be given to projects that generate cost savings to the state and those that are needed to meet legal and regulatory requirements. Other criteria for project approval include accounting integrity, collective benefit to the state, financial risk and impact to the state, and processing and reporting improvements.

If a department previously submitted a system or enhancement request that was not addressed, a new request following these procedures must be resubmitted. There is no way to validate the requests previously maintained under the Priority Application Workload System (PAWS) or identify the agency that submitted some requests. Therefore, only new requests for enhancements and development that meet established criteria and have CFO input and approval will be considered.

OFM will coordinate system development or enhancements with the Department of Information Technology. OFM will issue formal service requests documenting the business need and justification for the project. In addition, formal project charters will be signed to ensure that project objectives and scope are clearly understood.

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PART I - AGENCY		-		
1. REQUEST TYPE	2. DATE OF REQU	JEST		
□Add □Change				
3. REQUESTER'S NAME (Last, First, Middle Initial)	4. REQUESTER'S	DEPARTMENT	5. R	EQUESTER'S PHONE NUMBER
6. IDENTIFY THE BUSINESS NEEDS AND BENEF documentation.)	ITS FOR THE DEVELOPMENT O	R ENHANCEMENTS	(If necessary, a	ttach any screen prints or other
7. DOCUMENT HOW THE NEED IS CURRENTLY	BEING SATISFIED			
AGENCIES AFFECTED by the enhancements		-		
ALTENATIVE SOLUTIONS explored prior to requ	uest.			
10. HELP DESK SUGGESTIONS			1	11. HELP DESK TICKET #(s)
12. CHIEF FINANCIAL OFFICER S (CFO'S) SIGNA	ATURE (REQUIRED)	DATE	1	3. CFO's PHONE NUMBER
Forward the completed request to:				
Office of Financial Management, 7th Floor, Romney Bldg., Lansing, MI				
PART II - OFFICE OF FINANCIAL MANA	AGEMENT (OFM)		<u> </u>	
	DATE REQUEST RECEIVED	3. □Approve	□Reject	
4. PRIORITY				
□Very High □High	☐Medium	Low		
5. RATIONALE FOR APPROVAL OR REJECTION				
6. OFFICE OF FINANCIAL MANAGEMENT SIGNATURE				DATE